

**APPLICATION FOR EMPLOYMENT
UNITED STATES PROBATION OFFICE
MIDDLE DISTRICT OF FLORIDA**

*This form should be typewritten and
Mailed with a current resume to:*

**Human Resources
U.S. Probation Office
3036 S. Falkenburg Rd
Riverview, Florida 33578**

Date Submitted: _____

PERSONAL INFORMATION

Position Desired:

Name _____

Address _____

City/State _____ Zip _____

Phone Number:

Home []

Cell []

Work []

SS# _____ Driver's License No. _____

Citizenship _____ Place of Birth _____

(If not a U.S. citizen, proof of legal residency will be required)

Date of Birth _____ (if applying for Probation Officer & Assistant positions)

(Positions are listed as hazardous duty under the Federal Employees Retirement System. Applicants must be no older than 36 years, 6 months and must meet the minimum physical requirements.)

Have you ever filed an application with us before? Yes ____ No ____ . If yes, give date _____

Location Preference: (*Select 1st and 2nd choice*)

Jacksonville ____ Ocala ____ Ft. Myers ____ Orlando ____ Cocoa ____ Sarasota ____ Tampa ____

Duty station assignment will be based on the needs of the agency.

Have you ever been convicted of a crime: Yes ____ No ____ . If yes, explain _____

Have you ever been discharged or asked to resign from a position for any reason? Yes ____ No ____

If yes, explain: _____

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PERSONAL INFORMATION continued

Name of your direct Supervisor _____

May we contact your present employer? Yes ____ No ____.

May we contact your former employers for reference? Yes ____ No _____. If no, explain: _____

SPECIALIZED SKILLS:

Foreign language(s): Spoken/written: _____ proficiency: _____

EDUCATION

	Name/Location	Field of Study	Highest Level Completed	Year/Degree	Grade Point Average
High School					
Colleges: Undergraduate					
Post Graduate:					

Certifications _____

Professional Affiliations _____

You may exclude membership which would reveal gender, race, religion, national origin, disability, age, or other protected status

WORK HISTORY (Begin with current position. Include all periods of unemployment)

Company Name	Telephone ()
Address	Employed From: To:
Position Title	Annual Salary: Beginning: Ending:
Briefly describe duties	Reason For Leaving:

Company Name	Telephone ()
Address	Employed From: To:
Position Title	Annual Salary: Beginning: Ending:
Briefly describe duties	Reason For Leaving:

Company Name	Telephone ()
Address	Employed From: To:
Position Title	Annual Salary: Beginning: Ending:
Briefly describe duties	Reason For Leaving:

WORK HISTORY (continued)

Company Name	Telephone ()
Address	Employed From: To:
Position Title	Annual Salary: Beginning: Ending:
Briefly describe duties	Reason For Leaving:

OTHER QUALIFICATIONS/ADDITIONAL INFORMATION. Please attach a current resume.

Do not include any additional documents until requested. _____

APPLICANT CERTIFICATION

I **certify** that to the best of my knowledge and belief all of the information on and attached to this application is true, correct, complete, and made in good faith. I **understand** that false or fraudulent information on or attached to this application may be grounds for elimination of consideration for employment, or immediate discharge following employment, and may be punishable by fine or imprisonment. I understand that any information I give may be investigated. Completion of this application is solely for employment purposes and that the author certifies his/her intent is for no other reason than to get a job.

Signature _____ Date Signed _____